

NAME, ADDRESS, AND TELEPHONE NUMBER OF ATTORNEY(S)
OR OF PARTY APPEARING IN PRO PER

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ATTORNEY(S) FOR: Plaintiffs

**UNITED STATES DISTRICT COURT
CENTRAL DISTRICT OF CALIFORNIA**

COLLEEN MANGHANE; and ROBERT
MANGHANE,

Plaintiff(s),

CASE NUMBER:

5:25-cv-01107

v.
COUNTY OF SAN BERNARDINO; SHANNON
DICUS; DESERT VALLEY HOSPITAL; and
DOES 1-15, inclusive,

Defendant(s)

**CERTIFICATION AND NOTICE
OF INTERESTED PARTIES
(Local Rule 7.1-1)**

TO: THE COURT AND ALL PARTIES OF RECORD:

The undersigned, counsel of record for Plaintiffs, Colleen Manghane and Robert Manghane or party appearing in pro per, certifies that the following listed party (or parties) may have a pecuniary interest in the outcome of this case. These representations are made to enable the Court to evaluate possible disqualification or recusal.

(List the names of all such parties and identify their connection and interest. Use additional sheet if necessary.)

PARTY	CONNECTION / INTEREST
Colleen Manghane	Plaintiff
Robert Manghane	Plaintiff
County of San Bernardino	Defendant
Shannon Dicus	Defendant
Desert Valley Hospital	Defendant

May 7, 2025

Date

s/ Marcel F. Sincich

Signature

Attorney of record for (or name of party appearing in pro per):

Plaintiffs, Colleen Manghane and Robert Manghane